

CANDIDATE'S REPORT

(to be filed by a candidate or his principal campaign committee)

1. Qualifying Name and Address of Candidate

STEVE J. MORTILLARO
2111 HARVARD Ave
Metairie, LA 70001

2. Office Sought (include title of office as well as parish, city, town and/or election district)

Judge, Div. "A"
1ST Parish Court
Parish of Jefferson

OFFICE USE ONLY

10/95

Supp
3/11

3. Date of Primary 10/21/95

This report covers from 1/1/98 thru 12/31/98

4. Type of Report

- | | |
|--|--|
| <input type="checkbox"/> 10th day prior to primary | <input type="checkbox"/> 40th day after general |
| <input type="checkbox"/> 20th day prior to primary | <input checked="" type="checkbox"/> Annual (future election) |
| <input type="checkbox"/> 30th day prior to primary | <input type="checkbox"/> Supplemental (past election) |
| <input type="checkbox"/> 10th day prior to primary | <input type="checkbox"/> Amendment to prior report |
| <input type="checkbox"/> 10th day prior to general | |

5. FINAL REPORT #:

- Withdrawn Filed after the election AND all loans and debts paid
 Unopposed

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missing numbered pages
were blank and had no
information on them.

b. Name and Address of Financial Institution (You are required by law to use one or more banks or savings and loan associations as the depository of all campaign funds)

HIBERNIA BANK

METAIRIE, LA 70001

7. Full Name and Address of Treasurer

KATHRYN MORTILLARO
2111 HARVARD Ave
Metairie, LA 70001

8. FOR PRINCIPAL CAMPAIGN COMMITTEES ONLY

a. Name and address of principal campaign committee

JUDGE STEVE J. MORTILLARO
CAMPAIGN COMMITTEE

9. Name of Person Preparing Report

STEVE J. MORTILLARO

Daytime Telephone 504-831-9668

10. WE HEREBY CERTIFY that the information contained in this report and the attached schedules is true and correct to the best of our knowledge, information and belief, and that no expenditures have been made nor contributions received that have not been reported herein, and that no information required to be reported by the Louisiana Campaign Finance Disclosure Act has been deliberately omitted.

This 1st day of Feb. 1999.

b. Name and address of committee's chairperson

KATHRYN MORTILLARO
2111 HARVARD AVE.
Metairie, LA 70001

c. Name and address of all subsidiary committees, if any
(use additional sheets if necessary)

Kathryn Mortillaro

Signature of Candidate/Chairperson
(To be signed by Chairperson only if
report by principal campaign committee)

504-831-9668

Daytime Telephone

Kathryn Mortillaro

Signature of Treasurer

504-831-9668

Daytime Telephone

606066

SUMMARY PAGE

RECEIPTS	This Period
1. Contributions (Schedule A-1)	\$ 0
2. In-kind Contributions (Schedule A-2)	\$ 0
3. Campaign paraphernalia sales of \$25 or less	\$ 0
4. TOTAL CONTRIBUTIONS (Lines 1 + 2 + 3)	\$ 0
5. Other Receipts (Schedule A-3)	<u>\$ 26.86</u>
6. Loans Received (Schedule B)	\$ 0
7. Loan Repayments Received (Schedule D)	\$ 0
B. TOTAL RECEIPTS (Lines 4 + 5 + 6 + 7)	<u>\$ 26.86</u>

DISBURSEMENTS	This Period
9. Expenditures (Schedule E-1)	\$ 0
10. Other Disbursements (Schedule E-2)	<u>\$ 1,122.88</u>
11. Loan Repayments Made (Schedule B)	<u>\$ 1,000.00</u>
12. Funds Lent (Schedule D)	\$ 0
C. TOTAL DISBURSEMENTS (Lines 9 + 10 + 11 + 12)	<u>\$ 2,122.88</u>

FINANCIAL SUMMARY	Amount
14. Funds on hand at beginning of reporting period (Must equal funds on hand at close from last report or -0- if first report for this election)	<u>\$ 1,353.93</u>
15. Plus total receipts this period (Line B above)	<u>+ \$ 26.86</u>
16. Less total disbursements this period (Line C above)	<u>- \$ 2,122.88</u>
17. Less in-kind contributions (Line 2 above)	\$ 0
18. Funds on hand at close of reporting period	<u>\$ - 3,449.95</u>

SCHEDULE A-3: OTHER RECEIPTS

This schedule is used to report those receipts that are not "contributions"; that is, monies paid to the campaign that are not given for the purpose of supporting, opposing or otherwise influencing the nomination or election of a candidate to public office. Examples include interest or investment income. Receipts should be reported on this schedule only if they have not been reported elsewhere in this report. The explanation of the receipt should state the reason the payment was made to the campaign.

1. Name and Address of Source	2. Date	3. Explanation	4. Amount
Hibernia Bank Metairie, La 70021	1/1/98 90 12/31/98	Interest	\$26.86
5. Total OTHER RECEIPTS during this reporting period			\$26.86

SCHEDULE E-2: OTHER DISBURSEMENTS

This schedule is used to report those disbursements that are not "expenditures"; that is, monies paid by the campaign that are not paid for the purpose of supporting, opposing or otherwise influencing the nomination or election of a candidate to public office. Examples include the payment of taxes or the refund of contributions. Disbursements should be reported on this schedule only if they have not been reported elsewhere in this report. The explanation of the disbursement should state the reason the payment was made by the campaign.

6. Total OTHER DISABILITIES during this reporting period:

4/1/22. 88

SCHEDULE B: LOANS RECEIVED

The following information must be provided for each loan or line of credit received this reporting period, even if it has been repaid. Also, complete this schedule for loans received in prior periods that are still outstanding. Separate loans must be reported separately, even if from the same source. Any personal funds a candidate loans to his campaign must be reported on this schedule.

1. Name and address of lender

STEVE J. MORTILARO
211 HARVARD AVE.
Metairie, LA 70051

2. a. Date* _____ **b. Interest rate** ____ % (a.p.r.)

c. Amount borrowed* \$ _____

d. Balance due \$ _____

*For lines of credit, give the date the line of credit was first committed at Item 2a and list only the amount actually drawn at Item 2c.
OPTIONAL: Total amount of credit available \$ _____

3. Endorsers/Guarantors
4. Repayments this period

Date	Principal	Interest
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1-19-98	\$1,000.00	—
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(Enter the full name and address of each person or entity that has endorsed, guaranteed or otherwise secured the loan or line of credit. Also, state the amount of liability for each endorser or guarantor.)

(List payments of principal and interest separately. If separate amounts are not known, list all payments under principal.)

1. Name and address of lender

2. a. Date* _____ **b. Interest rate** ____ % (a.p.r.)

c. Amount borrowed* \$ _____

d. Balance due \$ _____

*For lines of credit, give the date the line of credit was first committed at Item 2a and list only the amount actually drawn at Item 2c.
OPTIONAL: Total amount of credit available \$ _____

3. Endorsers/Guarantors
4. Repayments this period

Date	Principal	Interest
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(Enter the full name and address of each person or entity that has endorsed, guaranteed or otherwise secured the loan or line of credit. Also, state the amount of liability for each endorser or guarantor.)

(List payments of principal and interest separately. If separate amounts are not known, list all payments under principal.)